

SSRP

**SOMERS CENTRAL SCHOOL DISTRICT
IN-HOUSE SUBSTITUTION COVERAGE FORM**

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***** NEW: These sheets must be handed in within 30 days of date of coverage
FIRST THREE PERIODS FOR THE YEAR ARE FREE.**

DO NOT RECORD PERIODS WITHOUT STUDENTS, EX.: YOUR LUNCH, SPECIALS.

**SOMERS HIGH SCHOOL TEACHING ASSISTANTS AND AIDES
Homeroom and announcements do not count as a period.**

DATE: _____ PRINT NAME: _____ BLDG: SHS

EMPLOYEE SIGNATURE: _____

EXAMPLE - Date: 09/02/2025 Period/Lock: 1 Minutes: 56 Covered for: Mr. Somers

Date: _____ Period: _____ Minutes: _____ Covered for: _____

Date: _____ Period: _____ Minutes: _____ Covered for: _____

Date: _____ Period: _____ Minutes: _____ Covered for: _____

Date: _____ Period: _____ Minutes: _____ Covered for: _____

Date: _____ Period: _____ Minutes: _____ Covered for: _____

Date: _____ Period: _____ Minutes: _____ Covered for: _____

Date: _____ Period: _____ Minutes: _____ Covered for: _____

*****7 PERIODS MAX COVERAGE, DO NOT INCLUDE LUNCH, SPECIALS, OR HOMEROOM**

COMPLETE & RETURN FOR PRINCIPAL'S APPROVAL. IF NOT SIGNED, PAYMENT WILL NOT BE MADE

*** PRINCIPAL SIGNATURE: _____ DATE: _____

PAYROLL USE ONLY: DO NOT WRITE BELOW THIS LINE PAYROLL USE ONLY:

**INHOU-AI = TAIDE
INHOU-TA = TASST**

Total 56 Minute Periods Covered: _____ @ \$31.55

3 Free Complete? _____

Print on white paper, single sided